Image# 28991191464 05% 23# 2008 13:30

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations

(a) Name of Individual, Organization or Corporation	
DEFENDERS OF WILDLIFE ACTION FUND	
(b) Address (number and street)	
(c) City, State and ZIP Code	
WASHINGTON DC 20036	FEC Identification Number
2. Corporate filers only	C C90007907
Is the filer a qualified nonprofit corporation?	
Individual filers only Name of Employer	Occupation
Than of Employer	
4. TYPE OF REPORT (check appropriate boxes):	
(a) April 15 Quarterly Report	-Hour Notice
☐ July 15 Quarterly Report	
October Quarterly Report	
☐ January 31 Year-End Report	
varidary of real End rioport	
(b) Is this Report an amendment? Yes \(\subseteq\) No \(\overline{X}\)	
5. COVERING PERIOD: FROM 05 / DD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
THROUGH	
$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	
r	
6. TOTAL CONTRIBUTIONS	.00
Г	1501.07
7. TOTAL INDEPENDENT EXPENDITURES	1501.87
Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior conservequest or suggestion of, a candidate or a candidate's agent or authorized committee or a political party committee or its agent. In additional properties are made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's reported herein were not made with the cooperation or prior conserved.	dition, if the independent expenditures
TYPE OR PRINT NAME OF PERSON COMPLETING FORM SIGNATURE	DATE
William Lutz	05/23/2008
NOTE: Submission of false, erroneous or incomplete information may subject the person signing this	
. , , , , , , , , , , , , , , , , , , ,	

For further information, contact:

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

DEFENDERS OF WILDLIFE ACTION FUND

Full Name (Last, First, Middle Initial) of Payee			Date
Ed Yoon			M M / D D / Y Y Y
Mailing Address			0.5 22 2008
146 S Oxford Ave #1			Amount
City	State	Zip Code	472.58
Los Angeles	CA	90004	
Purpose of Expenditure		Category/	Office Sought: House State: NM
salary		Type	Senate X Senate
Name of Federal Candidate Supported or Opposed by	Expenditure:	<u> </u>	President District:
Heather Wilson	·		Check One: Support X Oppose
			Disbursement For: X Primary General
Calendar Year-To-Date Per Election		21059.01	2008
for Office Sought			Other (specify)
Full Name (Last, First, Middle Initial) of Payee			Date
Joshua Sabato			0 5 D 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address			0.5 2.2 2.008 Amount
611 Lead Ave SW #505			
City	State	Zip Code	236.34
Albuquerque	NM	87102	
Purpose of Expenditure		Category/	Office Sought: House State: NM
salary		Type	Senate X Senate District:
Name of Federal Candidate Supported or Opposed by	Expenditure:	•	President ———
Heather Wilson			Check One: Support X Oppose
Calendar Year-To-Date Per Election			Disbursement For: X Primary General
for Office Sought		709.02	Other (specify)
Full Name (Last, First, Middle Initial) of Payee			
Kirk Kirk			Date
Mailing Address			$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
3017 Stevenson Place NW			Amount
City	State	Zip Code	206.75
City Washington	DC	20015	
Purpose of Expenditure			Office Sought: House State: NM
salary		Category/ Type	Senate X Senate
Name of Federal Candidate Supported or Opposed by	Expenditure:		President District:
Heather Wilson			Check One: Support X Oppose
			Disbursement For: X Primary General
Calendar Year-To-Date Per Election		620.25	2008
for Office Sought	•		Other (specify)
			915.67
(a) SUBTOTAL of Itemized Independent Expenditures			313.07
(b) SUBTOTALof Unitemized Independent Expenditur	.ec		
(b) SOBTOTALO: Officernized independent expenditur	os		
(c) TOTAL Independent Expenditures			
(carry total from last page forward to Line 7	")		

SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF FILER (In Full)
DEFENDERS OF WILDLIFE ACTION FUND

Full Name (Last, First, Middle Initial) of Payee		Date
Brian McGann		M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address		
3908 Victoria Oaks Trail		Amount
City State	Zip Code	147.66
Annandale VA	22003	
Purpose of Expenditure	Catagory	Office Sought: House State: NM
salary	Category/ Type	Senate X Senate State: NM
Name of Federal Candidate Supported or Opposed by Expenditure		President District:
Heather Wilson	.	Check One: Support X Oppose
Calendar Year-To-Date Per Election		Disbursement For: X Primary General
for Office Sought	494.49	Other (specify)
Full Name (Last, First, Middle Initial) of Payee		Date
Liam Flynn		M M / D D / Y Y Y Y
Mailing Address		05 / DDD / YYYY
283 Rimbley Ave		Amount
City State	Zip Code	147.66
Gahanna OH	43230	
Purpose of Expenditure	Catagory	Office Sought: House State: NM
salary	Category/ Type	Office Sought: House State: NM Senate X Senate
Name of Federal Candidate Supported or Opposed by Expenditure		President District:
Heather Wilson	.	Check One: Support X Oppose
Calendar Year-To-Date Per Election	440.00	Disbursement For: X Primary General
for Office Sought	442.98	Other (specify)
Full Name (Last, First, Middle Initial) of Payee		Date
Papa John's Pizza		
Mailing Address		$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
2206 Central Ave SW		Amount
City State	Zip Code	59.35
Albuquerque NM	87106	
Purpose of Expenditure	Catamanul	Office Sought: House Carry NIM
pizza canvassers	Category/ Type	Office Sought: House State: NM Senate X Senate
Name of Federal Candidate Supported or Opposed by Expenditure		President District:
Heather Wilson	.	
Calendar Year-To-Date Per Election	504.74	Disbursement For: X Primary General
for Office Sought	531.71	Other (specify)
	'	
(a) SUBTOTAL of Itemized Independent Expenditures		354.67
(b) SUBTOTALof Unitemized Independent Expenditures		
(a) TOTAL Independent Expanditures		
(c) TOTAL Independent Expenditures (carry total from last page forward to Line 7)		
, , , , , , , , , , , , , , , , , , , ,		

SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

DEFENDERS	OF WILDI	IFF AC	TION FU	ND

Full Name (Last, First, Middle Initial) of Payee		Date
Office Depot		M M / D D / Y Y Y Y Y O S O S O S O S O S O S O S O
Mailing Address		
5001 Cutler Ave NE		Amount
City	State Zip Code	132.50
Albuquerque	NM 87110	
Purpose of Expenditure	Category/	Office Sought: House State: NM
office supplies	Type	Senate X Senate District:
Name of Federal Candidate Supported or Opposed by Exp	penditure:	President District:
Heather Wilson		Check One: Support X Oppose
Calendar Year-To-Date Per Election		Disbursement For: X Primary General
for Office Sought	1038.64	2008 — July 2008 —
Full Name (Last, First, Middle Initial) of Payee		
Barelas Coffee House		Date
Markey Address		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
Mailing Address 1502 4th St SW		Amount
City.	itate Zip Code	15.35
	NM 87102	
Purpose of Expenditure		Office Sought: House Carry, NM
activist lunch	Category/ Type	Office Sought: House State: NM Senate X Senate
Name of Federal Candidate Supported or Opposed by Exp		President District:
Heather Wilson	Schalare.	Check One: Support X Oppose
Calendar Year-To-Date Per Election	15.35	2008
for Office Sought	10.00	Other (specify)
Full Name (Last, First, Middle Initial) of Payee		Date
Jesse Lifton		M M / D D / Y Y Y Y Y Y Y Z 2 2 2 2 2 0 0 8
Mailing Address		0.5 22 2008 Amount
611 Lead Ave SW #920		
•	State Zip Code	25.25
	NM 87102	
Purpose of Expenditure	Category/	Office Sought: House State: NM
mileage	Туре	Senate X Senate District:
Name of Federal Candidate Supported or Opposed by Exp	penditure:	President ———
Heather Wilson		Check One: Support X Oppose
Calendar Year-To-Date Per Election		Disbursement For: X Primary General
for Office Sought	50.50	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures		173.10
(b) SUBTOTALof Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		
(oan) total from last page forward to Line 1)		

SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

PAGE	5	/	5	

FOR LINE 7 FOR FORM 5

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NAME OF FILER (In Full)

DEFENDERS	OF WII	DI IFF	ACTION	FUND
	O1 VV1L		$\Delta O \cap O \cap A$	IOIND

Full Name (Last, First, Middle Initial) of Payee			Date
Smith's			M M / D D / Y Y Y Y Y Y Y Z 2 2 2 2 0 0 8
Mailing Address			
320 Yale Blvd SE			Amount
City	State	Zip Code	11.97
Albuquerque	NM	87102	
Purpose of Expenditure		Category/	Office Sought: House State: NM
water for canvassers		Type	Senate X Senate
Name of Federal Candidate Supported or Opposed by	/ Evnenditure	7.	President District:
Heather Wilson	ZAPONANTA	,.	Check One: Support X Oppose
Calendar Year-To-Date Per Election		44.07	Disbursement For: X Primary General 2008
for Office Sought		11.97	Other (specify)
Full Name (Last, First, Middle Initial) of Payee			Date
Ed Yoon			
Mailing Address			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
611 LEad Ave #502			Amount
011	State	7in Codo	21.21
City Albuqerque	NM	Zip Code 87102	
Purpose of Expenditure	I VIVI	1	Office County
mileage		Category/	Office Sought: House State: NM
-		Туре	Senate X Senate District:
Name of Federal Candidate Supported or Opposed by Heather Wilson	/ Expenditure	9:	President
Heather Wilson			Check One: Support X Oppose
Calendar Year-To-Date Per Election			Disbursement For: X Primary General
for Office Sought		21059.01	2008 Other (specify)
Full Name (Last, First, Middle Initial) of Payee			
Brian McGann			Date
Brian Modain			05 22 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address			Amount
611 Lead Ave SW #428			
City	State	Zip Code	25.25
Albuquerque	NM	87102	
Purpose of Expenditure		Category/	Office Sought: House State: NM
mileage		Туре	Senate X Senate
Name of Federal Candidate Supported or Opposed by	/ Expenditure); ;	President District:
Heather Wilson			Check One: Support X Oppose
			Disbursement For: X Primary General
Calendar Year-To-Date Per Election		494.49	2008
for Office Sought		10 11 10	Other (specify)
			50.40
(a) SUBTOTAL of Itemized Independent Expenditures	3		58.43
(b) SUBTOTALof Unitemized Independent Expenditu	res		
(a) TOTAL landers and set Freeze Planes			1501.87
(c) TOTAL Independent Expenditures(carry total from last page forward to Line 7			
(Sa) (Star Horri last page forward to Elife I	,		